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Registrar General's
Department

BIRTH REGISTRATION FORM

Date:
July, 20171. BIRTH IN THE DISTRICT OF: **HARMONS**2. PARISH: **MANCHESTER**3. NO. **IW 2873**4. Place of Birth: **HARMONS**6 Sex: **MALE**5. Date of Birth: **TWENTY-EIGHTH MAY, 2010**7. Name of Child: **SHELDON SAMUEL *****

8. Physician or registered midwife in attendance:

TRADITIONAL BIRTH ATTENDANT M MORANT**FATHER**9. Name and Surname: **SHAYE MORRISON *****10. Age at time of birth: **26 YEARS**11. Occupation: **LABOURER**12. Birthplace: **MANCHESTER****MOTHER**13. (a) Residence: **HARMONS**(b) Town/Village: **nil**(c) Parish: **MANCHESTER**14. No. of Children previously born to mother (a) Alive: **1**(b) Stillborn: **nil**15. Name and Surname: **MARCIA NADINE REID *****16. Age at time of birth: **20 YEARS**Maiden Name: **nil**18. Place: **ST THOMAS**17. Occupation: **HOME DUTIES**19. Name and Surname: **SHAYE MORRISON *******MARCIA NADINE REID *****20. Qualification: **FATHER****MOTHER**21. (a) Residence: **HARMONS****HARMONS**(b) Town/Village: **nil****nil**(c) Parish: **MANCHESTER****MANCHESTER**

REGISTRAR'S CERTIFICATE

22. (a) Signed in my presence by said informant:

23. Witness: **nil**24. Date: **SIXTEENTH JUNE, 2010**

Signed by Registrar

Name if added after Registration of birth

26. Name: **nil**28. Date Added: **NIL**27. Authority: **nil**

Last line of Vital Data



Deirdre English Gosse

Registrar General &
Deputy Keeper of the Records